. (	CLAIMS AS	FILED - F		(Colum	n 2)	SMAL TYPE			OR	OTHER'SMALL E	
OTAL CLAIMS		42				RA	TE ]	FEE	1	RATE	FEE
		NUMBER FILED		NURSER EXTRA		BASI	PEE	375.00	OR	BASIC FEE	750.00
OR CHARGE CLAME		12 minus 20=		. 32		XS		198	OR	X\$18=	
OTAL CHARGEABLE CLAIMS				• 3		-		84		X84=	
IDEPENDENT CLAIMS IULTIPLE DEPENDENT CLAIM P		minus 3 =		<u> </u>		<u>*</u>	2=	٥٦	OR	A642	
						+14	10=		OR	+280=	
if the difference i	n column 1 ls	less than ze	ro, ente	i _0_ pu co	dumn 2	TO	TAL		OR	TOTAL	
9/34/65 01	AIMS AS A	MENDED			(Column 3)	SM	ALL	ENTITY	OR	OTHER SMALL	NTITY
1	CLABIS REMADIENG AFTER AMENDMENT		NUA PREVI	REST BBER OUSLY FOR	PREBENT EXTRA	R	\TE	ADDI- TIONAL FEE		RATE	TIONA FEE
Total Independent	. C	Minus	Es	1	31 0	×	9=		OR	X\$18=	
Independent	•	Mires				×	120'		OR	X84=	
FIRST PRESE	NTATION OF M		U 2			+1	45-		OR:	+280=	
//\-	(2 - 1	> .14	ų -			5	OW		164	TOTAL ADDITATES	
2/2 2/1	6		(Ca)	שתה 2 <u>)</u>	(Column 3)	ABO	T. FEE	7	$\mathcal{L}$		
	(Column 1)		HIC	HEST	PRESENT			ADDI	J	1.1	ADD
	REMAINING AFTER		PRE	ADUSLY OFFOR	EXTRA	R	ATE	TIONAL		PATE	TION
Total Independent	AMENDMENT	Minus	1.7		. 7	1	7	11	ОЯ	X\$18=	
Independent	<del>                                      </del>	Minus		5	- 1	1  -	42•		1	V94-	
FIRST PRESE	NTATION OF N	IULTIPLE DE	PENDE	NT CLAIM		1 F			-l <sup>OF</sup>	1	<del>\</del>
						•	40=		<b>JOR</b>	' i	17
						ADD	TOTAL IT. FEE		_jof	ADDIT FE	
2-17-06	(Catumn 1)		(Co	tumo 2)	(Column 3	_		`			
U	CLAIMS REMAINING			CHEST	PRESENT			ADDI-	X	CATE	TION
2	AFTER			VIOUSLY ID FOR	EXTRA	]   [	ATE	TIONAL		RATE	FE
Total Independent	. 19	Minus		49	. 0	15	39-	17		X\$18=	
ž	. 2	Minus	-	5	- ()	7	(42-	V		V04	
Independent					. 7	7 I '		A	_10		
Independent FIRST PRES	ENTATION OF	MULTIPLE DI	EPENDE	NT CLAI		3	1404			+280=	

Application or Docket Number